



**LABORATORY REPORT**

**PATIENT INFORMATION**

[Redacted Patient Information]

OP / IP / DG # :



**REFERRED BY**

[Redacted Referred By Information]

**SPECIMEN INFORMATION**

**SAMPLE TYPE** : Serum  
 [Redacted Sample Information]  
**REPORT STATUS** : Final Report



**BIOCHEMISTRY**

Test Name (Methodology)	Result	Flag	Units	Biological Reference Interval
<b>Senior Citizens - Male Check</b>				
<b>Cholesterol Total - Serum</b>				
Cholesterol Total - Serum (Enzymatic colorimetric)	168.1		mg/dL	<200 No risk 200-239 Moderate risk >240 High risk
<b>VLDL (Very Low Density Lipoprotein)</b>				
VLDL (Very Low Density Lipoprotein) (Calculation)	29.6		mg/dL	<30
<b>Triglycerides</b>				
Triglycerides (Enzymatic colorimetry)	148.2		mg/dL	Normal: <150 Borderline-high: 150–199 High risk 200–499 Very high risk >500
<b>Cholesterol - HDL (Direct)</b>				
Cholesterol - HDL (Direct) (Enzymatic colorimetric)	38.5	L	mg/dL	<40 High Risk ; >60 No Risk
<b>Aspartate Aminotransferase (AST/SGOT)</b>				
Aspartate Aminotransferase (AST/SGOT) (IFCC kinetic)	13		U/L	<37
<b>Alanine aminotransferase - (ALT / SGPT)</b>				
Alanine aminotransferase - (ALT / SGPT) (Kinetic IFCC)	11		U/L	<41
<b>Protein Total, Serum</b>				
Protein Total, Serum (Biuret Method)	7.7		g/dL	6.4-8.3

[Redacted Signature]

*Sanjeeta*

**Dr.Sanjeeta**  
**Consultant- Biochemist**

[Redacted Contact Information]



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**SPECIMEN INFORMATION**

**SAMPLE TYPE** : Whole Blood - EDTA  
 [Redacted Sample Information]  
**REPORT STATUS** : Final Report



**HAEMATOLOGY**

Test Name (Methodology)	Result	Flag	Units	Biological Reference Interval
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**Senior Citizens - Male Check**

**Complete Blood Counts**

**(Automated Hematology Analyzer & Microscopy)**

Total Leukocyte Count	8.2		10 <sup>3</sup> /μl	4.0 - 11.0
RBC Count	4.5		10 <sup>6</sup> /μL	4.5 - 5.5
Hemoglobin	<b>10.7</b>	L	g/dL	13.0 - 17.0
Hematocrit	<b>34.1</b>	L	%	40 - 50
MCV(Mean Corpuscular Volume)	<b>75.6</b>	L	fL	83 - 101
MCH(Mean Corpuscular Hemoglobin)	<b>23.8</b>	L	pg	27 - 32
MCHC(Mean Corpuscular Hemoglobin Concentration)	31.5		g/dL	31.5 - 34.5
RDW	<b>19.6</b>	H	%	11.6 - 14
Platelet Count	382		10 <sup>3</sup> /μl	150 - 410
MPV	<b>6.3</b>	L	fL	7.5 - 11.5

**Differential Counts % (VCSN)**

Neutrophils	48.0		%	40-80%
Lymphocytes	40.0		%	20-40%
Monocytes	10.0		%	2-10%
Eosinophils	2.0		%	1-6%
Basophils	0.0		%	0-1%

**Differential Counts, Absolute**

Absolute Neutrophil Count	3.94		10 <sup>3</sup> /μl	2.0-7.0
Absolute Lymphocyte Count	<b>3.28</b>	H	10 <sup>3</sup> /μl	1.0-3.0
Absolute Monocyte Count	0.82		10 <sup>3</sup> /μl	0.2 - 1.0
Absolute Eosinophil Count (AEC)	0.16		10 <sup>3</sup> /μl	0.02-0.5
Absolute Basophil Count	0.00		10 <sup>3</sup> /μl	0.02 - 0.1

**Comments:**

Suggest Serum Ferritin And Iron Studies for Further Evaluation.

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 Central Reference Laboratory,  
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**HAEMATOLOGY**

Test Name (Methodology)	Result	Flag	Units	Biological Reference Interval
Senior Citizens - Male Check				

[Redacted Test Results]

*Madhu*

Dr. Madhu Batra  
 Consultant

[Redacted Signature]

This is an electronically authenticated laboratory report.

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AmPath collaborates directly with UPMC, one of the top ten hospitals in the United States according to US News & World Report.

AmPath upholds rigorous standards for operational and clinical performance based on US hospital benchmarks. Test results have been furnished in adherence with these standards and under terms and conditions found on the reverse. For details, please email AmPath at [customersupport@ampath.com](mailto:customersupport@ampath.com) or call: 040 6719 9977.



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**SPECIMEN INFORMATION**

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**BIOCHEMISTRY**

Test Name (Methodology)	Result	Flag	Units	Biological Reference Interval
<b>Senior Citizens - Male Check</b>				
<b>HbA1c - Glycated Hemoglobin</b>				
Glycated Hemoglobin, HbA1c (TINIA)	<b>8.80</b>	H	%	Non diabetic range: 4.8-5.6% Prediabetic range: 5.7-6.4% Diabetes range: >=6.5%
Estimated Average Glucose	205.9		mg/dL	

**Interpretation:**

*Note: HbA1c results may vary in situations of abnormal red cell turnover, such as pregnancy, recent blood loss or transfusion, or some anemias. In such cases only blood glucose criteria should be used to diagnose diabetes (ADA, 2014). Please correlate clinically.*



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**SAMPLE TYPE** : Fluoride Plasma - F  
 [Redacted Sample Information]  
**REPORT STATUS** : Final Report



**BIOCHEMISTRY**

Test Name (Methodology)	Result	Flag	Units	Biological Reference Interval
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**Senior Citizens - Male Check**

**Glucose - Fasting**

Glucose - Fasting (Hexokinase)	<b>142.0</b>	H	mg/dL	Normal : 74-100 Pre-diabetic : 100-125 Diabetic: >=126
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[Redacted Patient Information]

*Sanjeeta*

**Dr. Sanjeeta**  
 Consultant- Biochemist



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**PATIENT INFORMATION**

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**SPECIMEN INFORMATION**

**SAMPLE TYPE** : Urine  
 [Redacted Sample Information]  
**REPORT STATUS** : Final Report



**CLINICAL PATHOLOGY**

Test Name (Methodology)	Result	Flag	Units	Biological Reference Interval
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**Senior Citizens - Male Check**

**Urine Examination - Routine & Microscopy (CUE)**

**PHYSICAL EXAMINATION:**

Volume	20.00		mL	
Colour	PALE YELLOW			Pale
Appearance	Clear			Clear

**CHEMICAL EXAMINATION:**

pH (Dip stick)	6.50			4.8 - 7.4
Specific Gravity (Dip Stick(Bromothymol blue))	1.010			1.010 - 1.022
Protein (Dip Stick/ Sulfosalicylic acid)	NEGATIVE			Negative
Glucose (Dip Stick /Benedicts test )	NEGATIVE			Negative
Ketones (Dip stick)	NEGATIVE			Negative
Urobilinogen (Dip Stick / Ehrlich reaction)	NORMAL			Normal
Nitrite (Dip Stick / (Griess test ))	NEGATIVE			Negative
Bilirubin (Dipstick/diazo)	NEGATIVE			Negative
Blood (Dip Stick ( Peroxidase))	NEGATIVE			Negative

**MICROSCOPIC EXAMINATION:**

Pus Cells	2-3		/HPF	0 - 5
Epithelial Cells	1-2		/HPF	< 5
RBCs	NIL		/HPF	0 - 2
Casts	Absent		/LPF	Absent
Crystals	Absent		/HPF	Absent

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In collaboration with

**UPMC** LIFE CHANGING MEDICINE

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[REDACTED]  
[REDACTED]

**SPECIMEN INFORMATION**

**SAMPLE TYPE** : Urine  
[REDACTED]  
[REDACTED]  
[REDACTED]

**REPORT STATUS** : Final Report



**CLINICAL PATHOLOGY**

Test Name (Methodology)	Result	Flag	Units	Biological Reference Interval
-------------------------	--------	------	-------	-------------------------------

Senior Citizens - Male Check

[REDACTED]

*Madhu*

Dr. Madhu Batra  
Consultant

[REDACTED]

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**BIOCHEMISTRY**

Test Name (Methodology)	Result	Flag	Units	Biological Reference Interval
<b>Senior Citizens - Male Check</b>				
<b>Uric acid</b>				
Uric acid (Uricase)	5.0		mg/dL	3.4-7
<b>Blood Urea Nitrogen, BUN - Serum</b>				
Blood Urea Nitrogen (BUN) (Calculation)	8.41		mg/dL	8.4-26
<b>Creatinine</b> (Modified Jaffe Kinetic)	0.95		mg/dL	0.7-1.4
<b>Urea</b> (Kinetic, Urease)	18.0		mg/dL	18-55
<b>Calcium - Serum</b>				
Calcium - Serum (NM-BAPTA)	9.30		mg/dL	8.8 - 10.2
<b>Electrolytes (Na, K, Cl) - Serum</b>				
Sodium (ISE Indirect)	<b>128.0</b>	L	mmol/L	136 - 145
Potassium (ISE Indirect)	4.40		mmol/L	3.5-5.1
Chlorides (ISE Indirect)	<b>91.0</b>	L	mmol/L	98-107
<b>Vitamin D, 25-Hydroxy</b>				
Vitamin D, 25-Hydroxy (ECLIA)	<b>14.7</b>	L	ng/ml	Deficient: <=20 Insufficiency: 20-29 Desirable: >=30-100 Toxicity: >100

**Interpretation:**

● **Interpretation:**

- Vitamin D is a fat soluble vitamin produced in the skin by exposure to sun light. Deficiency in children causes rickets and in adults leads to osteomalacia

**Decreased:**

- Impaired cutaneous production (lack of sunlight exposure)
- Dietary absence

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Test Name (Methodology)	Result	Flag	Units	Biological Reference Interval
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**Senior Citizens - Male Check**

- Malabsorption
- Increased metabolism due to drugs like barbiturates, phenytoin.
- Liver disease
- Renal failure
- VIT D receptor mutation

**Increased:**

- Vitamin D intoxication due to increased vit D supplements intake

**Serum Iron**

Iron (FerroZine Colorimetric Assay)	<b>52.5</b>	L	µg/dL	59-158
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**Vitamin B12**

Vitamin B12 (ECLIA)	<b>157.5</b>	L	pg/mL	191-771
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**Interpretation:**

- Vitamin B12 also referred to as cobalamin is a water soluble vitamin. The uptake in the gastro intestinal track depends on intrinsic factor, which is synthesised by gastric parietal cells

**Deficiency state:**

- Lack of intrinsic factor due to autoimmune atrophic gastritis
- Mal-absorption due to gastrectomy
- Inflammatory bowel disease
- Dietary deficiency (strict vegans)
- Vit B12 deficiency results in megaloblastic anaemia, peripheral neuropathy, dementia and depression

**Increased levels:**

- VIT B12 supplement intake
- Polycythaemia Vera.

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**Senior Citizens - Male Check**

**PSA Total (Prostatic Specific Antigen, Total)**

PSA Total (ECLIA)	1.39		ng/mL	<4.1
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**Interpretation:**

**Interpretation:**

PSA is a protein produced by prostate gland in males. PSA test is used primarily to screen for prostate cancer

- PSA aids in early detection of prostate cancer

Follow up and management of prostate cancer patient during treatment & after surgery

- Check recurrence of cancer
- Increased levels :

Elevated levels are seen in benign prostatic hyperplasia, prostatitis ,genitourinary infection

**C-Reactive Protein (CRP) -quantitative**

C-Reactive Protein (CRP) Quantitative (Immunoturbidimetry)	2.4		mg/L	<5.0 (Negative)
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**Rheumatoid Factor (RA) - Quantitative - Serum**

Rheumatoid Factor (RA) - Quantitative - Serum (Immunoturbidimetry)	7.20		IU/mL	<14.0 (Negative)
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----- End Of Report -----

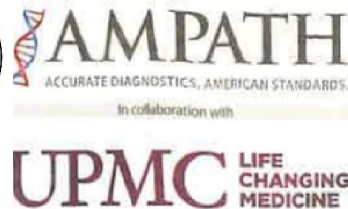
*Sanjeeta*

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Senior Citizens - Male Check				

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